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Fill in th	is information to identify the case:			
Debtor N	ame Holden Roberts Associates LLC			
United St	ates Bankruptcy Court for the: Eastern District of Pennsylvania			
Case nur	_{mber:} 22-13395-mdc	Check if t amended		an
Offic	ial Form 425C			
Mon	thly Operating Report for Small Business Under Chapter 11			12/17
Month:	November 2023 Date report filed:	1/31/20		
Line of		MM / DD / YYY 2362	~Y	
that I h	ordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury ave examined the following small business monthly operating report and the accompanying ments and, to the best of my knowledge, these documents are true, correct, and complete.			
Respons	Sible party: Christopher Linton, Managing Member			
Original	signature of responsible party			
Printed i	name of responsible party Christopher Linton			
	1. Questionnaire			
Ans	swer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicated.	Yes	No	N/A
	If you answer No to any of the questions in lines 1-9, attach an explanation and label it Exhibit A.			
1.	Did the business operate during the entire reporting period?	V		
2.	Do you plan to continue to operate the business next month?	V		
3.	Have you paid all of your bills on time?	V		
4.	Did you pay your employees on time?			V
5.	Have you deposited all the receipts for your business into debtor in possession (DIP) accounts?	V		
6.	Have you timely filed your tax returns and paid all of your taxes?	V		
7.	Have you timely filed all other required government filings?	V		
8.	Are you current on your quarterly fee payments to the U.S. Trustee or Bankruptcy Administrator?			
9.	Have you timely paid all of your insurance premiums?	V		
1.5	If you answer Yes to any of the questions in lines 10-18, attach an explanation and label it Exhibit	B		
10.	Do you have any bank accounts open other than the DIP accounts?		V	
11.	Have you sold any assets other than inventory?		V	
12.	Have you sold or transferred any assets or provided services to anyone related to the DIP in any way?		V	
	Did any insurance company cancel your policy?		V	
	Did you have any unusual or significant unanticipated expenses?		V	
			V	
15.			<u> </u>	
16.	Has anyone made an investment in your business?	_	_	_

Page 2 of 7 Document Case number 22-13395-mdc Holden Roberts Associates LLC **Debtor Name** 17. Have you paid any bills you owed before you filed bankruptcy? 18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy? 2. Summary of Cash Activity for All Accounts 19. Total opening balance of all accounts \$ 17,741.29 This amount must equal what you reported as the cash on hand at the end of the month in the previous month. If this is your first report, report the total cash on hand as of the date of the filing of this case. 20. Total cash receipts Attach a listing of all cash received for the month and label it Exhibit C. Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of Exhibit C. \$ 50,000.00 Report the total from Exhibit C here. 21. Total cash disbursements Attach a listing of all payments you made in the month and label it Exhibit D. List the date paid, payee, purpose, and amount. Include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in lieu of Exhibit D. **-** \$ 41,498.07 Report the total from Exhibit D here. 22. Net cash flow 8,501.93 Subtract line 21 from line 20 and report the result here. This amount may be different from what you may have calculated as net profit. 23. Cash on hand at the end of the month Add line 22 + line 19. Report the result here. **=** \$ 26,243.22 Report this figure as the cash on hand at the beginning of the month on your next operating report. This amount may not match your bank account balance because you may have outstanding checks that have not cleared the bank or deposits in transit. 3. Unpaid Bills Attach a list of all debts (including taxes) which you have incurred since the date you filed bankruptcy but have not paid. Label it Exhibit E. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from Exhibit E here. 24. Total payables (Exhibit E)

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Debtor Name Holden Roberts Associates LLC

Case number 22-13395-mdc

4. Money Owed to You

Attach a list of all amounts owed to you by your customers for work you have done or merchandise you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it *Exhibit F*. Identify who owes you money, how much is owed, and when payment is due. Report the total from *Exhibit F* here.

25.	Total receivables	\$ 218,499.00

(Exhibit F)

5. Employees

- 26. What was the number of employees when the case was filed?
- 27. What is the number of employees as of the date of this monthly report?

6. Professional Fees

- 28. How much have you paid this month in professional fees related to this bankruptcy case?

 \$ _____0

 29. How much have you paid in professional fees related to this bankruptcy case since the case was filed?

 \$ _____0
- 30. How much have you paid this month in other professional fees? \$______0
- 31. How much have you paid in total other professional fees since filing the case? \$_____0

7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any.

	Column A Projected	_	Column B Actual	=	Column C Difference
	Copy lines 35-37 from the previous month's report.		Copy lines 20-22 of this report.		Subtract Column B from Column A.
32. Cash receipts	\$	-	\$	=	\$
33. Cash disbursements	\$	-	\$	=	\$
34. Net cash flow	\$	_	\$	=	\$

- 35. Total projected cash receipts for the next month:
- 36. Total projected cash disbursements for the next month:
- 37. Total projected net cash flow for the next month:

0

0

= s

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_{Debtor Name} Holden Rob	erts Associates LLC
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Case number 22-13395-mdc

8. Additional Information

☐ 42. Project, job costing, or work-in-progress reports.

If available, check the box to the left and attach copies of the following documents.

38. Bank statements for each open account (redact all but the last 4 digits of account numbers).

39. Bank reconciliation reports for each account.

40. Financial reports such as an income statement (profit & loss) and/or balance sheet.

41. Budget, projection, or forecast reports.

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Statement Period 11/01/23 TO 11/30/23 Primary Account #:

If you have questions about your statement, contact the Business Customer Service Team at 1-877-768-1145.Hearing- and speech-impaired customers may use 7-1-1. www.santanderbank.com

0000 7 0 30

HOLDEN ROBERT ASSOCIATES LLC 71 W SPROUL RD SPRINGFIELD PA 19064

BUSINESS CHECKING			Statement Period 11/01/23 - 11/30/23
bosiness eneckind			
HOLDEN ROBERT ASSOCIATES	LLC		Account #
Balances			
Beginning Balance	\$17,741.29	Ending Balance	\$26,243.22
Deposits/Credits	+\$50,000.00	Average Daily Balance	\$28,233.46
Withdrawals/Debits	-\$41,498.07		

Checks Posted

Check #	Date Paid	Amount	Reference	Check #	Date Paid	Amount	Reference
156	11/06	\$250.00	0986328690	160	11/21	\$2,250.00	0988377455
157	11/10	\$1,725.00	0993702665	161	11/21	\$10,000.00	0988482360
E 158	11/16	\$1,738.50	BOROUGH OF WEST PU	163*	11/24	\$15,000.00	0988822830
159	11/20	\$1,470.00	0994574905	164	11/27	\$2,000.00	0995272160

8 Check(s) Posted = \$34,433.50

An asterisk (*) indicates a skip in sequential check numbers.

An (E) indicates check was converted to an electronic item.

Account Activity

Date Description	Credits	Debits	Balance
11-01 Beginning Balance			\$17,741.29
11-01 WEST-CHESTER PA WEST CHESTER /PA US CARD PURCHASE		\$2.25	\$17,739.04
11-06 CHECK 00000000156		\$250.00	\$17,489.04
11-10 CHECK 00000000157		\$1,725.00	\$15,764.04
11-15 CASH WITHDRAWAL SANTANDER D703 Media /PA US		\$100.00	\$15,664.04
11-16 BOROUGH OF WEST PURCHASE 231114 158		\$1,738.50	\$13,925.54
11-16 CITI CARD ONLINE PAYMENT 231115		\$3,162.96	\$10,762.58
11-17 BRANCH TRANSACTION AT MEDIA - PROVIDENCE - CHECK DEPOSIT.	\$50,000.00		\$60,762.58
11-20 TST* DOM & MIA' SPRINGFIELD /PA US CARD PURCHASE		\$40.00	\$60,722.58
11-20 GIANT FUEL 6442 HAVERTOWN /PA US CARD PURCHASE		\$45.16	\$60,677.42
11-20 CASH WITHDRAWAL PNC BANK PM4245 WEST CHESTER/PA US		\$60.00	\$60,617.42
11-20 CASH WITHDRAWAL FEE PNC BANK PM4245 WEST CHESTER/PA US		\$3.00	\$60,614.42
11-20 CHECK 00000000159		\$1,470.00	\$59,144.42
11-21 FEDEX OFFIC2840 SPRINGFIELD /PA US CARD PURCHASE		\$4.63	\$59,139.79
11-21 CHECK 00000000160		\$2,250.00	\$56,889.79
11-21 CHECK 00000000161		\$10,000.00	\$46,889.79
11-24 CHECK 00000000163		\$15,000.00	\$31,889.79
11-27 CHECK 00000000164		\$2,000.00	\$29,889.79
11-27 CITI CARD ONLINE PAYMENT 231124		\$3,284.65	\$26,605.14
11-28 AUTOMATED INSTAL INS.PMTS. 112723 300		\$10.00	\$26,595.14
11-28 PHILADELPHIA INS INS.PMTS. 112723 121		\$351.92	\$26,243.22
11-30 Ending Balance			\$26,243.22

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IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS CALL OUR BUSINESS CUSTOMER CONTACT CENTER AT 1-877-768-1145 OR WRITE TO THE BANK ATTN: BUSINESS CUSTOMER CONTACT CENTER

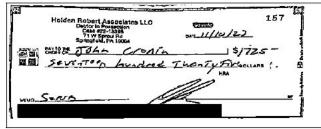
Santander Way RI1 EPV 02 23

East Providence, RI 02915

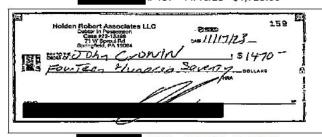
Please contact us if you think your statement or receipt is wrong or if you need additional information about a transfer on the statement or receipt. We must hear from you no later than 30 days after we sent you the FIRST statement on which the error appeared.



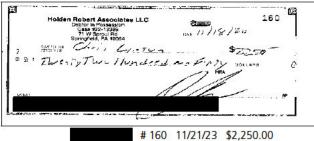
156 11/06/23 \$250.00



157 11/10/23 \$1,725.00



159 11/20/23 \$1,470.00





161 11/21/23 \$10,000.00



163 11/24/23 \$15,000.00



164 11/27/23 \$2,000.00

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